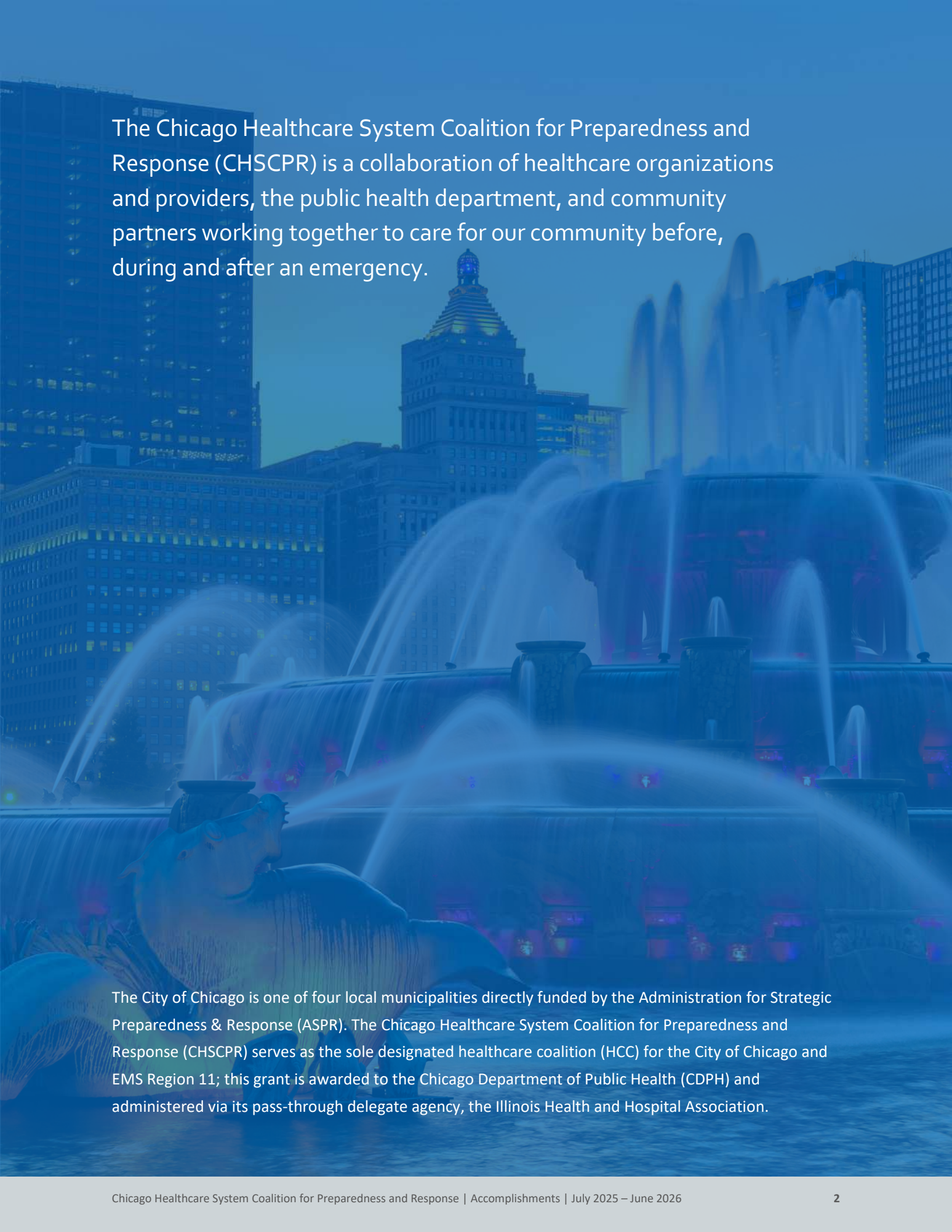


A composite image featuring the Chicago skyline in the background, a body of water in the middle ground, and a park with autumn foliage and a modern architectural structure in the foreground. A blue semi-transparent banner is overlaid across the middle of the image.

Accomplishments

JULY 2025 – JUNE 2026





The Chicago Healthcare System Coalition for Preparedness and Response (CHSCPR) is a collaboration of healthcare organizations and providers, the public health department, and community partners working together to care for our community before, during and after an emergency.

The City of Chicago is one of four local municipalities directly funded by the Administration for Strategic Preparedness & Response (ASPR). The Chicago Healthcare System Coalition for Preparedness and Response (CHSCPR) serves as the sole designated healthcare coalition (HCC) for the City of Chicago and EMS Region 11; this grant is awarded to the Chicago Department of Public Health (CDPH) and administered via its pass-through delegate agency, the Illinois Health and Hospital Association.

LEADERSHIP & COMMITTEE CHAIRS



EXECUTIVE COMMITTEE

Public Health Chair

Chicago Department of
Public Health

Healthcare Chair

Endeavor Health
Swedish Hospital

Healthcare Vice Chair

Loretto Hospital

Regional Hospital Coordinating Center (RHCC)

Advocate Illinois Masonic
Medical Center

At-Large Members

Erie Family Health Centers
Prime Healthcare St. Mary of
Nazareth Hospital
UChicago Medicine

Emergency Medical Services

Chicago Fire Department

Clinical Advisor

UChicago Medicine

Readiness Response Coordinator

Advocate Illinois Masonic
Medical Center

Emergency Management

Office of Emergency
Management and
Communications

Fiduciary Agent and Program Support

Illinois Health and
Hospital Association

CHAIRS

Information Sharing

Sinai Chicago

Medical Surge

Advocate Illinois Masonic
Medical Center

Responder Safety and Health

UChicago Medicine

Training and Exercise

Advocate Trinity Hospital

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MEMBERSHIP

Member organizations include but are not limited to the following Chicago healthcare and supporting organizations: acute care, specialty and long-term acute care hospitals; public health; emergency medical services; emergency management agencies; long-term care facilities; dialysis centers; Federally Qualified Health Centers (FQHCs); hospice; ambulatory surgery centers; mental health centers; organ procurement organizations; and home health agencies.

In February 2026, the HCC approved an amended Governance Charter. Key updates included clarifying language regarding leadership election and duties, removal of references to federal funding and minor editorial revisions.



33

Hospitals*



15

Long-Term
Care Facilities*



11

Dialysis
Centers*



35

Other
Stakeholders*

** Active organizations per category as of June 5, 2026*

HEALTHCARE SYSTEM PREPAREDNESS—PARTICIPATION

77

Meetings



8

Trainings



13

Drills/Exercises



HOSPITALS

Advocate Illinois Masonic Medical Center
Advocate Trinity Hospital
Ann & Robert H. Lurie Children's Hospital of Chicago
Ascension Saint Joseph - Chicago
Community First Medical Center
Endeavor Health Swedish Hospital
Holy Cross Hospital
Humboldt Park Health
Insight Hospital & Medical Center
Jackson Park Hospital & Medical Center
Jesse Brown VA Medical Center
John H. Stroger, Jr. Hospital of Cook County
Kindred Hospital Chicago North
La Rabida Children's Hospital
Loretto Hospital
Montrose Behavioral Health Hospital
Mount Sinai Hospital

Northwestern Memorial Hospital
Prime Healthcare Resurrection Medical Center
Prime Healthcare Saint Mary of Nazareth Hospital
Provident Hospital of Cook County
RML Specialty Hospital - Chicago
Roseland Community Hospital
Rush University Medical Center
Saint Anthony Hospital
Shirley Ryan AbilityLab
Shriners Children's Chicago
South Shore Hospital
St. Bernard Hospital and Health Care Center
Thorek Memorial Hospital
Thorek Memorial Hospital - Andersonville
UChicago Medicine
UI Health



PARTICIPATING HEALTHCARE PARTNERS

ACCESS Community Health Network	MADO Healthcare - Old Town
AHS Family Health Center	Medical District Home Dialysis
Alden Estates of Northmoor Rehabilitation & Health Care Center	Mercy Circle
Alden Lakeland Rehabilitation & Health Care Center	Misericordia
Alden Lincoln Rehabilitation & Health Care Center	Near North Health
Alden Village North	Nephron Dialysis Center Ltd
Alivio Medical Center	Park View Rehab Center
Aperion Care International	Pavilion of Logan Square
Best Home Healthcare Network	Pavilion of South Shore
Birchwood Plaza Nursing & Rehabilitation Center	Princeton Rehabilitation & Health Care Center
California Terrace Health Care	SAH Dialysis Center at 26th Street
Center Home for Hispanic Elderly	Saint Thomas Home Healthcare, Inc.
Comfort Care Home Health Care	Sanderling Renal Services
Cook County Cermak Health Services	Shifa Dialysis LLC
DaVita	Smith Village
Dialysis Care Center (DCC) - Beverly	St. Joseph Village of Chicago
Erie Family Health Centers	St. Mary of Providence: Rose-Angela Hall
Esperanza Health Centers	Symphony of Chicago West
Fresenius Kidney Care	Tapestry 360 Health
Friend Family Health Center	The Admiral at the Lake
Hamdard Health Alliance	The Clare
Home Dialysis Services Beverly - Renal Care Providers	The Pearl of Montclare
Howard Brown Health	The Selfhelp Home, Inc.
iCare Home Health	The Surgery Center at 900 North Michigan Ave
Kidney Care at Home, LLC	The Waterford Care Center
Lakeview Rehabilitation and Nursing Center	Thorek Retirement Home
Little Village Nursing and Rehabilitation Center	U.S. Renal Care
MADO Healthcare - Buena Park	Unity Hospice of Chicagoland
MADO Healthcare - Douglass Park	Visiting Nurses of Illinois, Inc.
	Warren Park Health and Living Center
	Wentworth Rehabilitation and Health Care Center
	Westwood Village Nursing and Rehabilitation Center

TRAINING

Identifying and assessing the preparedness to respond to an emergency by developing the necessary knowledge, skills, and abilities of HCC members' workforce.

Targeted training programs play a vital role in ensuring healthcare partners are highly skilled and ready to deliver seamless patient care under changing operational demands. In response to lessons learned, CHSCPR invested in a Hospital Incident Command Systems (HICS) training pilot program to provide bespoke HICS trainings to area resource hospitals and Special Pathogen Treatment Centers. These trainings underscored an opportunity to support hospital partners in developing resources for ongoing training of executive suite and incident management team stakeholders within their organizations. Three customized, in-person HICS training courses were delivered. These sessions focused on mastering core HICS frameworks, understanding command and control within the HCC context, and clarifying the roles within a Hospital Incident Management Team. Additionally, participants learned the principles of Incident Action Planning (IAP) and practiced applying these concepts directly to their own facility's specific emergency plans and policies.

The HCC created an on-demand Nursing Home Incident Command System (NHICS) training program

designed to strengthen emergency readiness across Long-Term Care (LTC) facilities.

Available in the Member Portal of CHSCPR.org, this comprehensive, two-hour modular tool instructs facilities on implementing a scalable command structure to manage crises effectively.

Additionally, five one-day, on-site first receiver decontamination trainings were conducted for member hospitals with active decontamination teams. The curriculum focused on essential readiness skills, including hazard identification, ICS structures, equipment setup, and proper personal protective equipment (PPE) utilization. Each session culminated in a live, full-scale drill using volunteers as mock patients.



EXERCISE

Conducting coordinated exercises that highlight applicable regulatory and compliance issues that assess the HCC's readiness by identifying resource needs and gaps before, during, and after an emergency.

Preparedness exercises play a vital role in ensuring healthcare partners are synchronized, responsive, and fully equipped to protect patient safety during complex public health emergencies. HCC members conducted a functional exercise simulating an extreme heat wave and utility failure. The scenario required the simulated evacuation of one hospital and one LTC facilities, resulting in a patient surge equal to 10% of all medical-surgical beds across participating facilities. The exercise brought together over 600 documented participants representing 67 HCC member and partner organizations.

Hospitals consistently demonstrated rapid activation of HICS and Emergency Operations Center (EOC) structures with clearly assigned leadership roles. All participating partner types successfully identified leadership authority for emergency activation and operational decision making. LTC facilities and dialysis partners demonstrated strong preparedness through established evacuation plans, defined triggers, and regular staff training programs. Hospitals effectively used multiple communication platforms to ensure timely internal coordination and situational awareness. Healthcare partners identified primary needs in formalizing the ICS and in identifying high-risk, technology-dependent patients. Areas for hospital improvement included refining patient tracking and expanding cooling capacity for critical care areas.



INFORMATION SHARING

The coordination and ability to conduct multijurisdictional, multidisciplinary exchange of public health and medical-related information and situational awareness between the healthcare system and partners.

The HCC constantly seeks to improve its information sharing capabilities and communication pathways. This year's highlights include:

- The HCC's Information Sharing Annex (formerly the Communications Annex) was updated to reflect changes to the region's redundant means of communication and to better align with ASPR/HPP grant deliverables (e.g. the addition of a P.A.C.E. plan).
- A comprehensive Healthcare Partners Radio Guide for STARCOM radios was created, posted to CHSCPR.org, and disseminated to HCC radio partners to print and keep near their radios. This document includes practical information on how to operate and configure radios, and how to initiate and respond to radio calls.
- 12 STARCOM radio drills were performed in 2025-2026, with HCC radio partners maintaining a healthy average response rate of 87%. There were a wider variety of drill start times and two unannounced drills this year, adding a realistic sense of unpredictability to the drills and bolstering communication preparedness among HCC radio partners.
- HPP funding allowed for the purchase of additional STARCOM radios, batteries, and charger adapters to be utilized by HCC radio partners.



Communication, By the Numbers

This year, over **225** emails were sent from chscpr@team-iha.org to HCC members and stakeholders, providing situational awareness, links to educational and training opportunities, and guidance/inquiries from local, state, and federal partners. There are over **410** unique contacts representing over **150** hospitals and healthcare organizations in the HCC distribution list.

CHSCPR.org continues to evolve as a hub for HCC members with the addition of a new Member Portal home page, the EM Subject Matter Expert Assistance Program, and RISC 2.0 Dashboard. Over **150** news and spotlight posts, **90** calendar events, **45** library resources, and several Member Portal resources were added to CHSCPR.org this year.

EMERGENCY OPERATIONS COORDINATION

Developing processes for notification and information exchange of healthcare delivery between relevant response partners, stakeholders, and healthcare organizations to determine immediate resource needs.

Extreme heat events and healthcare facility infrastructure challenges were a recurring focus for CHSCPR this year. The HCC worked closely with healthcare organizations, the CDP, and emergency management partners to share information regarding healthcare facility impacts, potential evacuation considerations, and healthcare system capacity concerns. These coordination efforts helped partners understand evolving conditions and prepare for disruptions to patient care.

CHSCPR also supported regional coordination related to emerging infectious disease threats and high consequence pathogens. Information and preparedness updates were shared with healthcare partners to promote awareness of developing public health concerns and support operational decision making.

In addition, the HCC supported information sharing surrounding special events and other incidents that had the potential to impact healthcare operations. By bringing together healthcare and response partners, CHSCPR helped strengthen regional awareness and coordination among organizations responsible for maintaining continuity of care during emergencies.



MEDICAL SURGE

Providing adequate medical evaluation and care planning during incidents that exceed the limits of the normal medical infrastructure within the community.

The HCC's Medical Surge Committee served as a vital forum to share situational awareness and preparedness considerations related to, among other topics, Mpox Clade I, H5N1, Invasive Meningococcal Disease, Measles, Hantavirus, Ebola, Flu, RSV, and COVID-19. Frontline hospital High Consequence Infectious Disease readiness remained a key area of focus and discussion for Committee members throughout the year.

Committee members also shared preparedness and response measures for actual cold and heat emergencies, evacuation incidents, shootings/violent incidents, civil unrest/protests, and special events/large gatherings throughout the city of Chicago. The HCC's Special Event Checklist for Hospitals, Extreme Heat Preparedness for Healthcare Facilities, and Winter Weather Readiness for Healthcare Facilities checklists were updated and frequently referenced by HCC members.

As an important contribution to the HCC's planning and documentation efforts, the Medical Surge Committee reviewed and approved the recently updated Evacuation/Shelter in Place Annex. Several Committee members also contributed to reviewing and updating the Emergency Operations Plan and to the development of a new Continuity of Operations Plan for the HCC.



RESPONDER SAFETY & HEALTH

Supporting healthcare organizations in planning, equipping, and training responders to effectively manage high-acuity public health emergencies – while promoting physical safety, fostering mental well-being, and strengthening long-term resilience.

The HCC achieved a historic milestone this year, securing a 100% hospital response rate for the Responder Safety & Health Committee’s comprehensive disaster cache list – a first in eight years. Supplies related to evacuation, extreme weather, utility outage, and decontamination were purchased.

Rapid, point-of-care malaria test kits and portable cooling units were purchased to increase safety and healthcare resiliency within city of Chicago hospitals and healthcare settings. By introducing rapid testing capabilities, frontline clinicians can now diagnose and initiate treatment within minutes rather than days. To proactively mitigate infrastructure vulnerabilities, the portable cooling units are available to be forward-deployed to healthcare facilities experiencing HVAC issues.



EMERGENCY RESPONSE PLANS

Integrated emergency plans provide the HCC and its regional partners with defined roles, responsibilities, and clear direction during critical incidents.

The HCC's Emergency Operations Plan (EOP) has helped guide hospital and healthcare emergency management through routine planned events like the Chicago Marathon, to complex unplanned emergencies like the COVID-19 pandemic. The document has long stood as an important roadmap for effective interagency collaboration at the regional level and beyond.

This year, the HCC's EOP underwent thoughtful revisions based on lessons learned from real-world incidents and exercises, and with assistance from an interdisciplinary team of HCC members, subject matter experts, and other stakeholders. The revision and update process included an initial analysis of the EOP conducted by an external consultant, followed by stakeholder interviews. Information collected from stakeholder interviews helped to clarify the HCC's current posture in hospital and healthcare emergency management in the Chicago region, along with an up-to-date listing of the EOP's written Annexes and Concept of Operations documents.

To help all HCC members quickly understand the composition, intended use, and value of the EOP, a companion "Introduction to the EOP" video was also created during the document revision process. Following approval by all HCC members later in 2026, the updated EOP and companion video will be posted to CHSCPR.org for convenient reference over many years to come.

In addition to updating its EOP this year, the HCC also undertook the development of a written Continuity of Operations Plan (COOP). Like revision of the EOP, creation of the HCC's COOP was methodical and in alignment with foundational ASPR/HPP guidelines. An initial list of HCC essential functions was created by the Executive Committee and then refined and vetted with HCC members during a subsequent in-person workshop. Essential functions were then validated and prioritized, and paired with inputs and dependencies, building out a significant portion of the COOP. With the addition of other key COOP concepts like lines of succession and communication redundancies, an outline was developed for the plan followed by an initial draft. HCC leadership provided substantive feedback that helped shape a final draft of the COOP, which will be presented to all HCC members for approval later in 2026.

Together, the EOP and COOP represent a renewed commitment to well-organized, informed, and collaborative hospital and healthcare emergency management in Chicago.

HIGH CONSEQUENCE INFECTIOUS DISEASE

Providing stakeholders in Chicago with situational awareness and resources high consequence infectious diseases.

The HCC designed a High-Consequence Infectious Disease (HCID) off-the-shelf tabletop exercise to support acute care hospitals in strengthening their preparedness for infectious disease threats, with a specific focus on Viral Hemorrhagic Fevers (VHFs). This discussion-based exercise is available in the Member Portal of CHSCPR.org. To guide participants, the tool begins with an instructional introductory video. Users can then select from three realistic, suspected VHF case scenarios to tailor the training to their facility's specific operational needs.

To further support healthcare facilities in maintaining readiness to respond to an HCID, PPE was purchased. This strategic acquisition focused on critical full-body protection to ensure staff safety during high-risk scenarios. Specifically, the purchases included protective coveralls and gowns, shoe covers, face shields, surgical masks, and caps. Additionally, various types of specialized gloves were secured to meet different clinical needs. By distributing these essential supplies, the HCC minimized supply chain vulnerabilities and strengthened the readiness of frontline clinicians.



PARTNER ENGAGEMENT

Engaging healthcare partners across the continuum of care to strengthen preparedness, foster collaboration, and ensure HCC activities reflect the needs of Chicago's diverse healthcare community.

CHSCPR revitalized the Healthcare Partners Workgroup this year, creating a dedicated forum for LTC facilities, dialysis centers, home health agencies, Federally Qualified Health Centers (FQHCs), and other healthcare partners to discuss emergency preparedness challenges and help inform coalition priorities. The Workgroup met three times during the year, contributing to the development of a long-term care focused evacuation mini drill and providing feedback on exercise objectives and injects for the June functional exercise.

In February, specialty hospitals from across Chicago participated in a Specialty Hospital Workshop focused on networking, collaboration, and coalition engagement. Participants received updates on coalition resources and initiatives while identifying opportunities to strengthen preparedness across specialty care settings. Discussions highlighted the value of coalition support for planning, exercises, and operational coordination, while also identifying future areas of focus including site visits, workplace violence preparedness, behavioral health evacuations, and cybersecurity incident response.

PRESENTATIONS

Stakeholder presentation at a healthcare conference.

National Association of County and City Health Officials (NACCHO) Preparedness Summit

April 13-16, 2026 Baltimore, Maryland

- *Hot Mess: Extreme Heat, Failing Infrastructure, and the Strain on Healthcare Systems* (Readiness Response Coordinator and CDPH – Oral Presentation)

As extreme weather events become more frequent and intense, healthcare systems are increasingly strained by aging infrastructure and climate-related disruptions. This session explores the real-world impact of extreme heat on hospital operations, including two recent hospital evacuations triggered by HVAC failures. Using these incidents as a backdrop, we examine the vulnerabilities of healthcare facilities during adverse weather and the operational challenges involved in maintaining patient safety and continuity of care. The session also highlights insights from a city-wide full-scale exercise simulating multiple tornadoes and utility failures, designed to test system resilience and cross-sector coordination. Attendees will gain practical strategies for integrating weather awareness into emergency planning and learn how collaborative preparedness efforts can strengthen healthcare infrastructure against weather-driven threats.

